PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  Application or Docket Number  37/82-79												
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTITY	OF		R THAN ENTITY
TOTAL CLAIMS			3					RATE	FEE	7	RATE	FEE
FOR -			NUMBER FILED .		NUMBER EXTRA			BASIC F	EE 385.0	0 OF	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=				•	X\$ 9:		OF	X\$18=	
INDEPENDENT CLAIMS			2 m	inus 3 =	•	•		X43=		1	Vac	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT		<del></del>			+145:	+	OF		
• If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL	- 7	OR OR	L	
CLAIMS AS AMENDED - PART II								IUIA	1500			<b></b>
						(Column 3)		SMAL	L ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
	Total	. 10	Minus	- 2	O			X\$ 9=		OR	X\$18=	
	Independent	. 2	Minus	***	3	=/		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	-	7	+290=	
							l	TOTA		OR	TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FE		JOR	ADDIT. FEE	
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE	]	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	I	X\$ 9=		OR	X\$18=	-
	Independent	•	Minus	***		=	ŀ	X43=	+	1	X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1	OR	700-	
+145=									J	OR	+290=	
ADDIT. I										OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum		(Column 3)						
MEN		CLAIMS REMAINING : AFTER AMENDMENT	•	HIGHE NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	H	X43=			X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A-70=		OR	∧00=	
										OR	+290=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE											TOTAL ODIT. FEE	
T	he "Highest Num	ber Previously Paid	For (Total or	Independen	it) is the	highest number	foun	d in the a	ppropriate be	x in col	umn 1.	

FORM PTO-875 (Rev. 10/03)

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